

**FOR NATIONAL MINORITY SMALL BUSINESS PERSON  
OF THE YEAR AWARD**

Industry—Indicate major Standard Industrial Classification (SIC)  
Code(s) of the firm.

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**COMPANY PROFILE**

**District Office:**

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1. Company Name: \_\_\_\_\_

2. Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

3. Chief Executive's Name: \_\_\_\_\_

Title: \_\_\_\_\_

4. Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

5. Business Description: \_\_\_\_\_

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6. Number of years in Business: \_\_\_\_\_ Current number of full-time employees: \_\_\_\_  
Number of full-time employees when business opened: \_\_\_\_\_

7. Is firm presently in the 8(a) Program? Yes \_\_\_\_ No \_\_\_\_

Was firm previously in the 8(a) Program? Yes \_\_\_\_ No \_\_\_\_

If yes, during what years? \_\_\_\_\_

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**EXPIRES: 08/01/04**

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<sup>1</sup>Name as it should appear on winner's plaque if selected. If two names are to be inscribed, please advise.

8. Is the firm a minority small business under Public Law 95-507 and SBA regulations (owned, managed, and controlled by member(s) of groups presumed to be socially disadvantaged)?

Yes \_\_\_\_\_ No \_\_\_\_\_

9. Largest Contract Dollar Amount \$ \_\_\_\_\_  
Customer \_\_\_\_\_

10. Give the following financial summary information for the last three fiscal years:

<b>Financial Summary Information</b>			
	<b>FY00</b>	<b>FY01</b>	<b>FY02</b>
<b>Total Sales</b>			
<b>Net Profit (Before Tax)</b>			
<b>Total Assets</b>			
<b>Total Liabilities</b>			
<b>Net Worth</b>			

11. Has the firm received any assistance from SBA? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, describe:

12. Describe any obstacles/adversities which were overcome by the firm:

13. Is company presently suspended or barred from receiving Federal Government Contracts?

Yes \_\_\_\_\_ No \_\_\_\_\_

14. Has the company received an SBA loan? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, complete the following:

Amount of Loan \$ \_\_\_\_\_ Date of Approval \_\_\_\_\_

Balance \$ \_\_\_\_\_

Status \_\_\_\_\_ (Indicate Current or Paid in Full)

15. We are not aware of any negative information about the company and/or its Principals which could be embarrassing to SBA.

District Director or designee initials: \_\_\_\_\_

16. Financial Summary and Employment Data

	(At 8(a) Certification)	(At FPPT Expiration)	(Most Recent)
	FY _____	FY _____	FY _____
8(a) Sales	_____	_____	_____
Non-8(a) Sales	_____	_____	_____
<b>Total Sales</b>	_____	_____	_____
Net Profit Before Tax	_____	_____	_____
Total Assets	_____	_____	_____
Total Liab.	_____	_____	_____
Net Worth	_____	_____	_____

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Number Full-Time  
Employees

\_\_\_\_\_

17. Describe any obstacles/adversities the company has overcome.